AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

Better Health Care for all Floridians

ELIZABETH DUDEK
SECRETARY

, 2012

Administrator
Good Samaritan Retirement Hm
507 S.E. 1st Avenue
Williston, FL 32696

Dear Administrator:

Re: CCR #2012008690

This letter reports the findings of a state licensure survey that was conducted on , 2012 by representative(s) of this office.

Attached is the provider's copy of the State (3020) Form, which indicates the deficiencies that were identified on the day of the visit. Section 408.811(4), Florida Statutes, requires that you correct these deficiencies within thirty days of the date of this letter unless the Agency has approved another timeframe.

The Quality Assurance Questionnaire has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at http://ahca.myflorida.com/Publications/Forms.shtml as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under Health Facilities and Providers on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for the assistance provided to the surveyor(s). Should you have any questions please call Anna Lopez at 386-462-6201.

Sincerely,

Kristie J. Mennella
Field Office Manager

KJM/al
Enclosure State Form 3020

XG90

Headquarters
2727 Mahan Drive
Tallahassee, FL 32308
http://ahca.myflorida.com

Alachua Field Office
14101 N W Hwy 441, Suite 800
Alachua, FL 32615-5669
Phone (386) 462-6201; Fax (386) 418-5300

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AL11910275	A. BUILDING _____ B. WING _____	

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GOOD SAMARITAN RETIREMENT HM	507 S.E. 1ST AVENUE WILLISTON, FL 32696

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	Initial Comments	A 000		

An unannounced complaint survey for CCR# 2012008690 was conducted on [redacted]. The facility was found to not be in compliance with Chapter 408, Part II and 429 Part I, Florida Statues and 58 A-5 Florida Administrative Code.

A 025 SS=G	58A-5.0182(1) FAC Resident Care - Supervision	A 025		

An assisted living facility shall provide care and services appropriate to the needs of residents accepted for admission to the facility.
(1) SUPERVISION. Facilities shall offer personal supervision, as appropriate for each resident, including the following:
(a) Monitor the quantity and quality of resident diets in accordance with Rule 58A-5.020, F.A.C.
(b) Daily observation by designated staff of the activities of the resident while on the premises, and awareness of the general health, safety, and physical and emotional well-being of the individual.
(c) General awareness of the resident ' s whereabouts. The resident may travel independently in the community.
(d) Contacting the resident ' s health care provider and other appropriate party such as the resident ' s family, guardian, health care surrogate, or case manager if the resident exhibits a significant change; contacting the resident ' s family, guardian, health care surrogate, or case manager if the resident is discharged or moves out.
(e) A written record, updated as needed, of any significant changes as defined in subsection 58A-5.0131(33), F.A.C., any illnesses which resulted in medical attention, major incidents, changes in the method of medication administration, or other changes which resulted in the provision of additional services.

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A 025	Continued From page 1	A 025		

This Statute or Rule is not met as evidenced by:
Based on record review, observation and interview the facility failed to provide a care and services to meet the needs for a diet for 1 (Resident #3) of 6 sampled residents.

Findings:

Observation on at 12:13 PM revealed Resident #3 was given a plastic cup (approximately 8 ounces) filled of Hormel brand MED PASS fortified nutritional shake.

Observation on at 12:20 PM during the assistance with self-administration of medication, after lunch revealed that medical technician (Med Tech) A stated, "she's (Resident #3) is not supposed to get MED PASS, she's a

Interview on at 2:45 PM with Resident Aide C, she stated, "I give it (cup of Hormel MED PASS nutritional shake) to her 3 times a day; I give it to her at breakfast and lunch and I make sure to tell the person working at dinner to make sure she gets it."

Observation at this time of the label on the MED PASS container revealed it contained 170 calories, 57 grams of , and 16 grams of sugar. that resident #3 consumed the product 3 times a day, the resident consumed 510 calories, 171 grams of and 48 grams of sugar per day.

Record review revealed that resident #3's Medical Observation Record (MOR) dated "for listed [Monday,

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A 025	Continued From page 2 Wednesday, Friday] 6:30 AM." Record review revealed the resident's Medical Observation Record (MOR) dated ... through ... included: "One Touch Ultra System K1---use as directed." Interview on ... at 4:05 PM with Med Tech A she stated, "[named physician] said she (Resident #3) has her ... under control so he canceled her ... Phone interview on ... at 4:10 PM with resident #3's physician revealed he stated he did not cancel resident #3's ... The physician added that he was not aware that resident #3 was getting a MED PASS shake 3 times a day. Class: II	A 025		
A 052 SS=G	58A-5.0185(3) FAC Medication - Assistance with Self-Admin (3) ASSISTANCE WITH SELF-ADMINISTRATION. (a) For facilities which provide assistance with self-administered medication, either: a nurse; or an unlicensed staff member, who is at least ... trained to assist with self-administered medication in accordance with Rule 58A-5.0191, F.A.C., and able to demonstrate to the administrator the ability to accurately read and interpret a prescription label, must be available to assist residents with self-administered medications in accordance with procedures described in Section 429.256, F.S. (b) Assistance with self-administration of medication includes verbally prompting a resident to take medications as prescribed, retrieving and opening a properly labeled medication container,	A 052		

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A 052	Continued From page 3	A 052		

and providing assistance as specified in Section 429.256(3), F.S. In order to facilitate assistance with self-administration, staff may prepare and make available such items as water, juice, cups, and spoons. Staff may also return unused doses to the medication container. Medication, which appears to have been contaminated, shall not be returned to the container.
(c) Staff shall observe the resident take the medication. Any concerns about the resident ' s reaction to the medication shall be reported to the resident ' s health care provider and documented in the resident ' s record.
(d) When a resident who receives assistance with medication is away from the facility and from facility staff, the following options are available to enable the resident to take medication as prescribed:
1. The health care provider may prescribe a medication schedule which coincides with the resident ' s presence in the facility;
2. The medication container may be given to the resident or a friend or family member upon leaving the facility, with this fact noted in the resident ' s medication record;
3. The medication may be transferred to a pill organizer pursuant to the requirements of subsection (2), and given to the resident, a friend, or family member upon leaving the facility, with this fact noted in the resident ' s medication record; or
4. Medications may be separately prescribed and dispensed in an easier to use form, such as unit dose packaging;
(e) Pursuant to Section 429.256(4)(h), F.S., the term " competent resident " means that the resident is cognizant of when a medication is required and understands the purpose for taking the medication.
(f) Pursuant to Section 429.256(4)(i), F.S., the

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A 052	Continued From page 4	A 052		

terms " judgment " and " discretion " mean interpreting vital signs and evaluating or assessing a resident ' s condition.
(4) Assistance with self-administration does not include:
(a) Mixing, converting, or medication doses, except for measuring a prescribed amount of liquid medication or breaking a scored tablet or crushing a tablet as prescribed.
(b) The preparation of syringes for injection or the administration of medications by any injectable route.
(c) Administration of medications through intermittent positive pressure breathing machines or a
(d) Administration of medications by way of a tube inserted in a cavity of the body.
(e) Administration of preparations.
(f) Irrigations or debriding agents used in the treatment of a skin condition.
(g) , , or preparations.
(h) Medications ordered by the physician or health care professional with prescriptive authority to be given " as needed, " unless the order is written with specific parameters that preclude independent judgment on the part of the unlicensed person, and at the request of a competent resident.
(i) Medications for which the time of administration, the amount, the strength of dosage, the method of administration, or the reason for administration requires judgment or discretion on the part of the unlicensed person.

This Statute or Rule is not met as evidenced by:
Based on record review, interview and observations, the facility provided non licensed staff to assist 2 (#5 and #6) of 6 residents who did not fit the definition of "competent resident".

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A 052	Continued From page 5	A 052		

Findings

1. According to 58A-5.0185(3)(e) of the Florida Administrative Code, "the term 'competent resident' means that the resident is cognizant of when a medication is required and understands the purpose of taking the medication."

2. Record review of AHCA Form 1823 dated for Resident # 5 revealed that she has a diagnosis of type and she needs assistance with self-administration of medications.

Interview on at 4:00 PM with Resident # 5 revealed that she was not sure what day it was but she thought it was Friday (it was Thursday). She also stated that she did not know what medications she took that she just took them.

Observation on at 4:15 PM revealed that the Med Tech was assisting with medications for Resident # 5. The Med Tech placed the medications in a cup and poured some juice in a cup and gave it to the Resident. She then told the Resident what the medications were for and then the resident took the medications.

3. Record review of AHCA Form 1823 dated for Resident # 6 revealed that she has diagnoses of , and requires assistance with self-administration of medications.

Interview on at 3:50 PM with Resident # 6 revealed that she was not sure what day it was and that she does not take any medications.

Observation on at 4:37 PM revealed

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A 052	Continued From page 6 that the Med Tech was assisting with medications for Resident # 6. The Med Tech placed the medications in a cup and poured some juice in a cup and gave it to the Resident. She then told the Resident what the medications were for and then the resident took the medications. Class: II	A 052		
A 053 SS=G	58A-5.0185(4) FAC Medication - Administration (4) MEDICATION ADMINISTRATION. (a) For facilities which provide medication administration a staff member, who is licensed to administer medications, must be available to administer medications in accordance with a health care provider ' s order or prescription label. (b) Unusual reactions or a significant change in the resident ' s health or behavior shall be documented in the resident ' s record and reported immediately to the resident ' s health care provider. The contact with the health care provider shall also be documented in the resident ' s record. (c) Medication administration includes the conducting of any examination or testing such as glucose testing or other procedure necessary for the proper administration of medication that the resident cannot conduct himself and that can be performed by licensed staff. (d) A facility which performs clinical laboratory tests for residents, including glucose testing, must be in compliance with the federal Clinical Laboratory Improvement Amendments of 1988 (CLIA) and Part I of Chapter 483, F.S. A valid copy of the State Clinical Laboratory License and the CLIA Certificate must be maintained in the facility. A state license or CLIA certificate is not required if residents perform the test	A 053		

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A 053	Continued From page 7	A 053		

themselves or if a third party assists residents in performing the test. The facility is not required to maintain a State Clinical Laboratory License or a CLIA Certificate if facility staff assist residents in performing clinical laboratory testing with the residents' own equipment. Information about the State Clinical Laboratory License and CLIA Certificate is available from the Clinical Laboratory Licensure Unit, Agency for Health Care Administration, 2727 Mahan Drive, Mail Stop 32, Tallahassee, FL 32308; telephone (850)487-3109.

This Statute or Rule is not met as evidenced by: Based on record review, observation and interview the facility failed to have a licensed staff administer all medications to 3 of 6 (#2, #5 and #6) sampled residents.

Findings:

1. Record review of the health assessment (AHCA Form 1823) dated , for Resident # 2, revealed that she needs medication administration.

Review of the medication administration record from through for Resident # 2 revealed that these medications were administered by facility medication technician (med tech): Puff, eye drops, Polyethylene Powder, Acidophilus, eye drops, eye drops -Salmon aerosol Amlopidine eye drops and

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A 053	Continued From page 8	A 053		

Interview on [redacted] at 1:45 PM with the Med Tech A revealed that she gives Resident # 2 some of her medications and that the hospice nurse gives the resident her other medications.

Interview on [redacted] at 2:00 PM with the hospice nurse revealed that hospice nursing administers, [redacted] eye drops [redacted] patch, [redacted] and [redacted] treatment for Resident # 2.

2. Record review of AHCA Form 1823 dated [redacted] for Resident # 5 revealed that she has a diagnosis of [redacted] type [redacted] and she needs assistance with self-administration of medications.

Interview on [redacted] at 4:00 PM with Resident # 5 revealed that she was not sure what day it was but she thought it was Friday (it was Thursday). She also stated that she did not know what medications she took that she just took them.

Observation on [redacted] at 4:15 PM revealed that the Med Tech was assisting with medications for Resident # 5. The Med Tech placed the medications in a cup and poured some juice in a cup and gave it to the Resident. She then told the Resident what the medications were for and then the resident took the medications.

3. Record review of AHCA Form 1823 dated [redacted] for Resident # 6 revealed that she has diagnoses of [redacted] and requires assistance with self-administration of medications.

Interview on [redacted] at 3:50 PM with Resident # 6 revealed that she was not sure what day it

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A 053	Continued From page 9 was and that she does not take any medications. Observation on at 4:37 PM revealed that the Med Tech was assisting with medications for Resident # 6. The Med Tech placed the medications in a cup and poured some juice in a cup and gave it to the Resident. She then told the Resident what the medications were for and then the resident took the medications. According to 58A-5.0185(3)(e) of the Florida Administrative Code, "the term 'competent resident' means that the resident is cognizant of when a medication is required and understands the purpose of taking the medication." Class: II	A 053		
A 091 SS=B	58A-5.0191(12) FAC Training - Documentation & Monitoring (12) TRAINING DOCUMENTATION AND MONITORING. (a) Except as otherwise noted, certificates, or copies of certificates, of any training required by this rule must be documented in the facility ' s personnel files. The documentation must include the following: 1. The title of the training program; 2. The subject matter of the training program; 3. The training program agenda; 4. The number of hours of the training program; 5. The trainee ' s name, dates of participation, and location of the training program; 6. The training provider ' s name, dated signature and credentials, and professional license number, if applicable. (b) Upon successful completion of training pursuant to this rule, the training provider must	A 091		

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A 091	Continued From page 10	A 091		

issue a certificate to the trainee as specified in this rule.
(c) The facility must provide the Department of Elder Affairs and the Agency for Health Care Administration with training documentation and training certificates for review, as requested. The department and agency reserve the right to attend and monitor all facility in-service training, which is intended to meet regulatory requirements.

This Statute or Rule is not met as evidenced by:
Based on record review and interview the facility did not have a copy of medication assistance certificate training for 1 out of 3 medication technicians (Med Tech B).

Findings:

Record review for Med Tech B revealed that there was not a copy of her medication assistance certificate in her file.

Interview with Administrator on [redacted] at 3:00 PM revealed that she was not sure where the certificate for Med Tech B was but that she knew she was certified.

Interview on [redacted] at 9:40 AM with pharmacist from Sunshine Drugs revealed that Med Tech B did take the medication assistance training on [redacted] at his facility.

Class: [redacted]